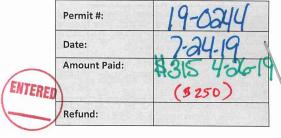
SUBMIT: COMPLETED APPLICATION, TAX STATEMENT AND FEE TO: **Bayfield County** Planning and Zoning Depart. PO Box 58 Washburn, WI 54891 (715) 373-6138

### **APPLICATION FOR PERMIT** BAYFIELD COUNTY, WISCONSIN



Bayfield Co. Zoning Dept.



Copy of Tax Statement
ou recently purchased the property send your Recorded De

INSTRUCTIONS: No permits will be issued until all fees are paid.

DO NOT START CONST				HAVE BEEN ISSUED TO A	PPLICANT.		FILL OU	T IN INK (NO P	ENCIL)		
TYPE OF PERMIT RE Owner's Name:	EQUEST	ED-	LANI	D USE   SANITA		CONDITIONA		. USE 💢 B.C		OTHER	
	illa	1	ehr	ivia 🔾	iling Address:	Took Dr. City	/State/Zip: weville, MM	1 55113	Telephon	ne:   484 417(	
Cam Address of Property: 14830	11100			_ City	v/State/Zip:	outs. L	TO COLINC, 10		Cell Pho		
14830	sto	rte	HWAY 1	3	Horbster,	WI 549	844			696233	
Contractor:					.,,	Plumber:			Plumber		
								#			
Authorized Agent: (Pe	erson Signi	ing Appli	cation on behal	f of Owner(s)) Age	ent Phone:	Agent Mailing Ad	Idress (include City/State	e/Zip):	Written	Authorization	
				Tax	UD#			T	☐ Yes	□ No	
PROJECT LOCATION	Legal [	Descrip	tion: (Use T	ax Statement)	(ID# 12-)-3	5				owing Ownershi	
			Gov't Lot	Lot(s) CSM	Vol & Page CSI	M Doc # Lot(	s) No. Block(s) No.	Subdivision			
1/4,	1,	/4					6 2	Plat of	2 Orch	and City	
Section 5	. Town	ship	50 N. R	ange 07 W	Town of:	Sep.	•	Lot Size	Acrea	ige	
	_ ,	.sp	10,10	v	Clo	VCV		49.71 x 139.9	6.	Ko	
1				n 300 feet of River, St		Distance Stru	cture is from Shorelin	ne: Is Pro	perty in	Are Wetlan	
Shoreland				- Committee of the comm	f yescontinue —			feet Floodp	lain Zone?	Present?	
	Is Pi	roperty	//Land withii	n 1000 feet of Lake, P If	ond or Flowage  f yescontinue	Distance Stru	cture is from Shorelin		Yes No	☐ Yes ▼ No	
Non-Shoreland										7	
Value at Time of Completion						# of	W	hat Type of		Туре	
* include		Proje	ct	# of Stories	Foundation	bedrooms	Sewer/	Sanitary Syste		Wate	
donated time & material						structure	Is on	the property?		proper	
	New	/ Const	truction	☐ 1-Story	☐ Basement	<b>X</b> 1	X Municipal/City		a I Solopellos	☐ City	
	Addition/Alteration			1-Story + Loft	1	□ 2	☐ (New) Sanitary			X We	
80,000	☐ Con		n existing bldg)	☐ 2-Story		□ 3	☐ Sanitary (Exists ☐ Privy (Pit) or				
			ness on		Use	□ None	☐ Portable (w/ser		III 200 gail	011)	
-	Prop	erty			X Year Round		☐ Compost Toilet	Toilet			
							None				
Existing Structure Proposed Constru		mit bei	ng applied fo	or is relevant to it)	Length: 3(*)	, (	Width:		leight:	×/- t	
In the second constitu	iction.				cengen 3C		width.	21	leight:	16'	
Proposed Use	9	<b>√</b>			Proposed Structu	ıre		Dimensi	ons	Square Footage	
					ucture on property)			( X	)		
	-	X		e (i.e. cabin, huntin with Loft	g shack, etc.)			( 24 - x 3	50)	690	
X Residential L	Jse		t	with a Porch			( 24 X	81	322		
				with (2 <sup>nd</sup> ) Porch			( X	)			
			,	with a Deck				(30 X	8),	160	
Commercial	Lico			with (2 <sup>nd</sup> ) Deck	la contraction of the contractio			( X:	;	u I	
	-		Runkhou	with Attached G	sleeping quarters	. av 🗆 aaakina 9	( X	- )			
	-				date)			( X	)		
7			Addition	/Alteration (specify	/)		( X	)			
Municipal Us	se		Accessor	y Building (specify	/)		( X	)			
		X	Accessor	y Building Addition	/Alteration (specify	1 enlarge	elect	(-j4-X	8)	112	
DCC 1a	_					1 )					
11 Blog	10		Special U	se: (explain)				( X	)		
H	au							( X	)		
- 11					APTING CONSTRUCTION	1 4 4 1 4 1 4 1		( X	1		
I (we) declare that this ap	plication (in	ncluding a	ny accompanyin	g information) has been exar	mined by me (us) and to the b	est of my (our) knowl	T WILL RESULT IN PENALT edge and belief it is true, corre etermining whether to issue a p	ect and complete 1/	we) acknowled	dge that I (we) am	
	rolying on t	this inforr	mation I (we) am	(are) providing in or with th	is application. I (we) consent	to county officials cha	etermining whether to issue a parged with administering coun	ty ordinances to have	accept liabilit access to the	y wnich may be a above described	
result of Bayfield County	le time for t	the purpo						- 1	1	- 010	
property at any reasonable	le time for t	the purpo	. 1	0				4	141	1017	
property at any reasonable  Owner(s):	le time for t	la purpo	Lek		or letter(s) of authorizat	ion must accompa	any this application)	Date	141.	7017	
owner(s):  (If there are Multip	ole time for t	la la rs listed	on the Deed	All Owners must sign o				-			
property at any reasonable  Owner(s):	ole time for t	la la rs listed	on the Deed	All Owners must sign o	er of authorization must			Date			
owner(s):  (If there are Multip  Authorized Agent:	ole time for the control of the country of the coun	la rs listed	on the Deed	All Owners must sign o		st accompany this		Date			

**Show Location of:** Show / Indicate:

**Proposed Construction** 

Fill Out in Ink – NO PENCIL

(2)

North (N) on Plot Plan Show Location of (\*): (\*) Driveway and (\*) Frontage Road (Name Frontage Road)

(3) Show: (4)

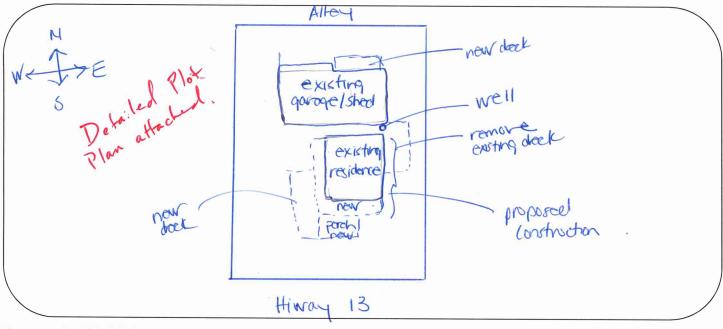
All Existing Structures on your Property (5) Show:

Show any (\*): (6)

(\*) Well (W); (\*) Septic Tank (ST); (\*) Drain Field (DF); (\*) Holding Tank (HT) and/or (\*) Privy (P)

(\*) Lake; (\*) River; (\*) Stream/Creek; or (\*) Pond

Show any (\*): (7)(\*) Wetlands; or (\*) Slopes over 20%



Please complete (1) - (7) above (prior to continuing)

Changes in plans must be approved by the Planning & Zoning Dept.

(8) Setbacks: (measured to the closest point)

Description	Measurement		Description	Measurement
			,	
Setback from the <b>Centerline of Platted Road</b>	87 Feet		Setback from the <b>Lake</b> (ordinary high-water mark)	N/ Feet
Setback from the Established Right-of-Way	55 Feet		Setback from the River, Stream, Creek	N/A Feet
			Setback from the Bank or Bluff	N/A Feet
Setback from the <b>North</b> Lot Line	m deck) 12 Feet			
	m porch) 55 Feet		Setback from Wetland	N/A Feet
Setback from the <b>West</b> Lot Line	mec) 9 Feet		20% Slope Area on the property	☐ Yes XNo
Setback from the East Lot Line	om eve) 7 Feet		Elevation of Floodplain	N/A Feet
				10.1
Setback to Septic Tank or Holding Tank	N/A Feet		Setback to Well	eckting Feet
Setback to <b>Drain Field</b>	N/P Feet			
Setback to <b>Privy</b> (Portable, Composting)	N/A Feet			
Prior to the placement or construction of a structure within ten (10) feet	of the minimum required setback	, the b	oundary line from which the setback must be measured must be visible from o	ne previously surveyed corner to the

other previously surveyed corner or marked by a licensed surveyor at the owner's expense.

Prior to the placement or construction of a structure more than ten (10) feet but less than thirty (30) feet from the minimum required setback, the boundary line from which the setback must be measured must be visible from one previously surveyed corner to the other previously surveyed corner to the other previously surveyed corner, or verifiable by the Department by use of a corrected compass from a known corner within 500 feet of the proposed site of the structure, or must be

(9) Stake or Mark Proposed Location(s) of New Construction, Septic Tank (ST), Drain field (DF), Holding Tank (HT), Privy (P), and Well (W).

NOTICE: All Land Use Permits Expire One (1) Year from the Date of Issuance if Construction or Use has not begun. For The Construction Of New One & Two Family Dwelling: <u>ALL</u> Municipalities Are Required To Enforce The Uniform Dwelling Code. The local Town, Village, City, State or Federal agencies may also require permits.

Issuance Information (County Use Only)	Sanitary Number:	unicipal	# of bedrooms:	Sanitary Date: 1. 11	Affach				
Permit Denied (Date):	Reason for Denial:	0.1,5.2	1.00	<b>W</b> 17					
Permit #: 19-6244	Permit Date: 7-24	1-19							
Is Parcel a Sub-Standard Lot Is Parcel in Common Ownership Is Structure Non-Conforming  SYes (Deed of Record (Fused/Contiguent))  Yes (Deed of Record (Fused/Contiguent))	ous Lot(s)) No	Mitigation Required Mitigation Attached	☐ Yes ►No ☐ Yes ▶No	Affidavit Required Affidavit Attached	/es □ No /es □ No				
Granted by Variance (B.O.A.)  XYes □ No Case #: 19 ~ 0	58	Previously Granted by Variance (B.O.A.)  ☐ Yes SNo Case #:							
Was Parcel Legally Created Was Proposed Building Site Delineated  Yes □ No  Yes □ No		Were Property Lines Represented by Owner Was Property Surveyed  Wes							
Inspection Record: Pre-existing labin Landahurs have class 3 approval to Valiance approval for the Structure	is being 142cm Residence in	dard sebu commercial of Land let una	ilt as new:	Zoning District ( Lakes Classification (	( ) 1-50pm				
5/1/19	inspected by.	d Norwood	6	Date of Re-Inspection					
Condition(s): Town, Committee or Board Conditions Attache  Condition: A UDC permit from the locally contracted UDC inspection agency must be obtained prior to the start of construction.  Must meet and maintain setbacks.  Signature of Inspector: (rada Norwood)  Date of Approval: (e   L)									
Hold For Sanitary: 🗌 Hold For TBA: 🔲	Hold For Affid	lavit: 🗌	Hold For Fees: 🗌						

city, Village, State or Federal May Also Be Required

LAND USE SANITARY - Public Sewer SIGN -SPECIAL -CONDITIONAL -BOA - X (May 20, 2019) (Affidavit Doc# 2019R-577731)

## **BAYFIELD COUNTY** PERMIT

WEATHERIZE AND POST THIS PERMIT ON THE PREMISES DURING CONSTUCTION

No.	19-02	44	ļ	Issue	d To: Ca	mil	a A Lehr			1					
Commer Location:	cial Zon		(within	shore	land) Section	5	Township	50	N.	Range	7	W.	Town of	Clover	
Location.		•													
Gov't Lot			Lot	6	Blo	ck	<b>2</b> Su	ıbdivisio	on <b>P</b>	lat or Or	cha	rd Cit	y CSM#		
												1-4/0/	070 on ft o	waa and 10 80	a ff in

A variance from the terms of Section 13-1-26(a)(2) and (d) to allow a substandard lot (6,970 sq ft area and 49.89 ft in For: width) served by public sanitary sewer to be built on per Board of Adjustment approval.

You (the property owner) shall fulfill the conditions placed by the Board of Adjustment; your recorded affidavit; sanitary (if applicable) and/or any additional requirements placed by this Department. The Planning and Zoning Department requires verification/proof that all conditions have been met. Any future expansions or development would require additional permitting. (Disclaimer): The Planning and Zoning Department does not authorize the beginning of any construction or land use; you must first obtain land use application(s)/permit card(s) from the Planning and Zoning Department.

Must meet all setback requirements Condition(s):

You are responsible for complying with state and federal laws concerning construction near or on wetlands, lakes, and streams. Wetlands that are not associated with open water can be difficult to identify. Failure to comply may result in removal or modification of construction that violates the law or other penalties or costs. For more information, visit the department of natural resources wetlands identification web page or contact a department of natural resources service center (715) 685-2900.

NOTE: Changes in plans or specifications shall not be made without obtaining approval.

This permit may be void or revoked if any of the application information is found to have been misrepresented, erroneous, or incomplete.

This permit may be void or revoked if any performance conditions are not completed or if any prohibitory conditions are violated.

<b>Board of Adjustment / T</b>	odd	Norwood
--------------------------------	-----	---------

Authorized Issuing Official July 24, 2019

Date

## APPLICATION FOR RECREATIONAL VEHICLE

Bayfield County Planning and Zoning Department P.O. Box 58
117 East Fifth Street
Washburn, WI 54891
Phone – (715) 373-6138



Office Use:

Zoning District/Lakes Class R8 / 1

Application No. 19-0057

Date 7-30-19

Fee Paid 875 6-28-19

ENTERED

INSTRUCTIONS: No permits will be insided until all fees are paid.

Checks are made payable to: Bayfield County Zoning Department.

DO NOT START CONSTRUCTION UNTIL ALL PERMITS HAVE BEEN ISSUED TO APPLICANT.

Changes in plans must be approved by the Zoning Department

Property Owner Brian Kerckhoff	Property Address 90570 Bark PT. Rd
Mailing Address 90570 Bark Pt. Rd	of RV placement.  Herbster, WI 54844
Herbster, WI 54844	Agent:
Telephone (850) 510 - 6906	Written Authorization Attached: Yes ( ) No ( )
Accurate Legal Description involved in this request:	
1/4 of1/4 of Section $24$ Township $5/$ N.	Range 7 W. Town of Clover
Gov't Lot Block Subdivision	CSM#
Volume Page of Deeds Parcel I.D. #	
Volume Page of Deeds Parcel I.D. #	
	ATTACH Copy of Tax Statement
Volume page of Deeds Parcel I.D. #	ATTACH Copy of Tax Statement

FAILURE TO OBTAIN A PERMIT or PLACING RV ON PROPERTY WITHOUT A PERMIT WILL RESULT IN PENALTIES

#### APPLICANT - PLEASE COMPLETE REVERSE SIDE

	For Office Use Only	Zoning District/Lakes Class: 1 - Uk Sup
Permit Issued:	Sanitary Number _	18 - 1435 Date 18 - 29 - 18
Issuance Date 7-30-19	Permit Number 19-025	Permit Denied (Date)
Reason for Denial:		
Inspection Record: <u>Owkw</u>	on site and everything	appears code compliant.
	By lodd Norwird Date of	Inspection 7 - 9 - 19
Variance (B.O.A.) #		
Condition: RV may be placed u	ip to 4 months from issuance date. Mus	st be removed by:
	Signed Todd Norund	7-11-19
W W Colon W	Inspector	Date of Approval

use frontage road as a guideline, and indicate North (N) on plot plan

the RV (Recreation Vehicle) location

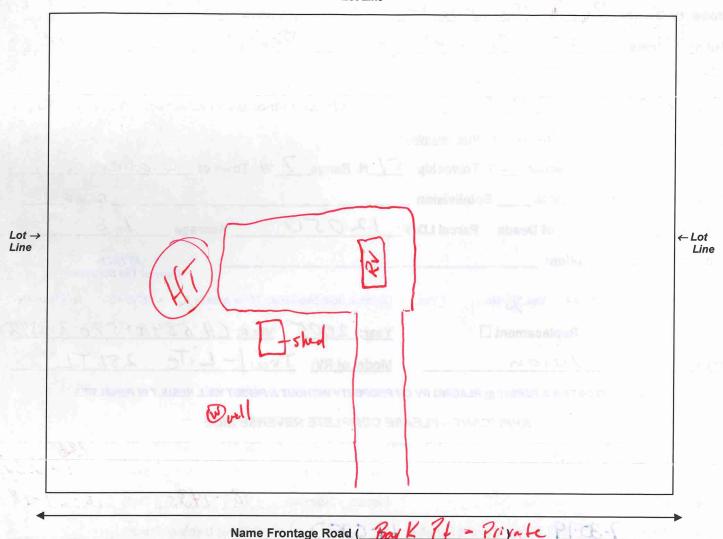
ow dimensions in feet on the following:

- a. RV from centerline of road(s).
- b. RV from right-of-way line
- c. RV from property lines

IMPORTANT
Detailed Plot Plan is Neccessary

- d. RV from lake, river, stream or pond
- e. RV from Privy

Lot Line



NOTICE: The local town, village, city, state or federal agencies may also require permits.

I (we) declare that this application (including any accompanying information) has been examined by me (us) and to the best of my (our) knowledge and belief it is true, correct and complete. I (we) acknowledge that I (we) am (are) responsible for the detail and accuracy of all information I (we) am (are) providing and that it will be relied upon by Bayfield County in determining whether to issue a permit. I (we) further accept liability which may be a result of Bayfield County relying on this information I (we) am (are) providing in or with this application. I (we) consent to county officials charged with administering county ordinances to have access to the above described property at any reasonable time for the purpose of inspection.

Owner or Authorized Agent	HOD //	Date 7//9/2019
Address to send permit 90570	Bark Parnt Rd; Herbs	ter, WI 54844

May Also Be Required

SANITARY - Holding Tank (18-143S)
SIGN
SPECIAL
CONDITIONAL
BOA

# BAYFIELD COUNTY PERMIT

WEATHERIZE AND POST THIS PERMIT ON THE PREMISES DURING CONSTUCTION

No. 1	9-02	257					Issued To:	Br	ian Kerckh	off						
Part of Location		_	1/4	of	_	1/4	Section	24	Township	51	N.	Range	7	W.	Town of	Clover
Par in Gov.t Lo	ot	3		L	_ot		Block		Sub	divisic	n		CSI	M#		
Make:																
Conditio	May not be used for permanent residence  Condition: Allowed for 4 months  Must be removed by November 30, 2019															
NOTE:	E: Changes in plans or specifications shall not be made without obtaining approval.									Todd Norwood  Authorized Issuing Official						
	This permit may be void or revoked if any of the application information is found to have been misrepresented, erroneous, or incomplete.									nd	July 30, 2019					
	This permit may be void or revoked if any performance conditions are not completed or if any prohibitory conditions are violated.									Date						